Table 12.6h Persistency of Discharge Regimen by Follow-up Period, 2002 to 2006 **Recipients with Lung Transplants**

	Year of Transplant						
	2002	2003	2004	2005	2006		
Discharge Regimen (w/ or							
w/o Steroid Use)	ì						
CyA+Aza	[
At Discharge (N)	198	167	179	156	95		
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%		
1 Year PostTx (%)	39.4%	45.2%	56.4%	76.8%	73.7%		
2 Years PostTx (%)	22.5%	26.1%	26.3%	32.8%	35.1%		
3 Years PostTx (%)	15.2%	21.0%	15.9%	16.4%	-		
CyA+MMF							
At Discharge (N)	163	137	111	103	84		
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%		
1 Year PostTx (%)	46.6%	53.0%	59.2%	70.9%	58.2%		
2 Years PostTx (%)	31.1%	36.2%	34.9%	46.4%	-		
3 Years PostTx (%)	22.1%	28.4%	28.4%	17.4%	-		
CyA+Siro							
At Discharge (N)	3	1	-	-	-		
At Discharge (%)	100.0%	100.0%	-	-	-		
1 Year PostTx (%)	66.7%	100.0%	-	-	-		
2 Years PostTx (%)	66.7%	100.0%	-	-	-		
3 Years PostTx (%)	66.7%	100.0%	-	-	-		
Siro+MMF							
At Discharge (N)	1	1	4	2	1		
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%		
1 Year PostTx (%)	0.0%	0.0%	25.0%	50.0%	0.0%		
2 Years PostTx (%)	0.0%	0.0%	25.0%	-	0.0%		
3 Years PostTx (%)	0.0%	0.0%	-	-	0.0%		
Tac+Aza							
At Discharge (N)	220	275	275	316	370		
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%		
1 Year PostTx (%)	55.5%	55.0%	66.8%	64.1%	76.2%		
2 Years PostTx (%)	40.4%	36.7%	46.7%	46.9%	71.9%		
3 Years PostTx (%)	31.5%	28.0%	36.6%	41.7%	-		
Tac+MMF							
At Discharge (N)	240	282	394	568	613		
At Discharge (%)	100.0%	100.0%	100.0%	100.0%	100.0%		
1 Year PostTx (%)	74.8%	76.8%	84.3%	78.3%	81.3%		
2 Years PostTx (%)	57.4%	62.9%	69.4%	62.6%	76.5%		
3 Years PostTx (%)	48.7%	54.4%	57.8%	45.6%	-		
Tac+Siro							
At Discharge (N)	1	-	4	3	11		
At Discharge (%)	100.0%	-	100.0%	100.0%	100.0%		

(Continued)

Source: OPTN/SRTR Data as of May 1, 2008.

Regimen change is defined as being on different drug combination at follow-up comparing to discharge, or indication of conflicting regimen (CyA vs. Tac; MMF/MPA vs. Aza; Siro vs. Evero) during follow-up period, or graft failure/death. Addition or deletion of steroids is not considered a regimen change.

Rates are calculated for the most common discharge regimens.

CyA: Cyclosporine; Tac: Tacrolimus; MMF: Include MMF(Mycophenolate Mofetil) and MPA(Mycophenolate Sodium); Aza: Azathioprine; Siro: Sirolimus.

See Technical Notes for further details.

Table 12.6h (Continued) Persistency of Discharge Regimen by Follow-up Period, 2002 to 2006 **Recipients with Lung Transplants**

	Year of Transplant						
	2002	2003	2004	2005	2006		
Discharge Regimen (w/ or w/o Steroid Use) Tac+Siro							
1 Year PostTx (%)	100.0%	-	75.0%	66.7%	75.0%		
2 Years PostTx (%)	100.0%	-	50.0%	-	75.0%		
3 Years PostTx (%)	100.0%	=	50.0%	=	-		

Source: OPTN/SRTR Data as of May 1, 2008.

Regimen change is defined as being on different drug combination at follow-up comparing to discharge, or indication of conflicting regimen (CyA vs. Tac; MMF/MPA vs. Aza; Siro vs. Evero) during follow-up period, or graft failure/death. Addition or deletion of steroids is not considered a regimen change. Rates are calculated for the most common discharge regimens.

CyA: Cyclosporine; Tac: Tacrolimus; MMF: Include MMF(Mycophenolate Mofetil) and MPA(Mycophenolate Sodium); Aza: Azathioprine; Siro: Sirolimus.

See Technical Notes for further details.